

CLAIMS ONLY

Application Number

Filing Date

Applicant(s)

CLAIMS

AS FILED

AFTER FIRST AMENDMENT

AFTER SECOND AMENDMENT

* May be used for additional claims or amendments

Indep. Depend

Indep. Depend

Indep. Depend

Indep

Depend

Indep

Depend

Indep

Depend

1

2

3

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42

43

44

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46

47

48

49

50

Total

Indep

Total

Depend

Total

Claims

2

13

15

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52

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97

98

99

100

Total

Indep

Total

Depend

Total

Claims